

THE CITY OF WICHITA, KANSAS  
CENTRAL INSPECTION DIVISION

File No. \_\_\_\_\_

Date \_\_\_\_\_

LICENSE APPLICATION FOR OPERATION OF A MOBILE HOME PARK  
(Sub+ in triplicate)

New \_\_\_\_\_

Existing \_\_\_\_\_

**APPLICATION IS HEREBY MADE** for license to operate a Mobile Home Park (one or more mobile homes) in conformance with the ordinances of the City of Wichita, Kansas. I hereby certify that the statements made on this application and the attached exhibits are true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner

Legal Description of Proposed Park:  
  
\_\_\_\_\_

Owner :

Address:

Tel: \_\_\_\_\_

If Applicable:

Name of Park: \_\_\_\_\_

Address \_\_\_\_\_ Tel: \_\_\_\_\_

Name of Operator: \_\_\_\_\_

Address: \_\_\_\_\_ Tel: \_\_\_\_\_

Number of Spaces:

Electricity:

Water: City:

Sewage: City

Fuel: Public

Private \_\_\_\_\_

Private

Private

Required Exhibits: Plat of proposed park (in triplicate). Minimum Scale-1" equals 30'.

Include: Park dimensions.

Number, location and size of spaces.

Location and size of buildings, sewers, water lines, gas lines,  
sewage disposal system and water supply wells.

Applicable to new parks only: Layout shall include topographical contours,  
drainage and grade plans.

\_\_\_\_\_  
OFFICE USE ONLY:

In compliance with park layout requirements: \_\_\_\_\_ Electricity: \_\_\_\_\_

A P P R O V A L

WICHITA-SEDGWICK COUNTY HEALTH DEPARTMENT

CENTRAL INSPECTION DIVISION

BY \_\_\_\_\_

BY \_\_\_\_\_

Date \_\_\_\_\_

Date \_\_\_\_\_